

Disclaimer

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Medicaid topics up for discussion...

- NAME Biennial Survey results
- Expansion of fee-for-service reimbursements
- Free Care Expansion
- Visit limits/Medical Necessity Interpretation
- ECATS Update
- Medicaid fund identy
- DMA Reorganization to managed care

NAME Biennial Survey

- Voluntary survey conducted by the National Alliance for Medicaid in Education (NAME) every other year
- Directors for Special Education (Education) and School Health Services (Medicaid) are identified for every state and invited via email to participate in this survey
- As of September 15th, 35 states responded
- Special thanks to Rick Jacobs who chairs the Biennial Survey Workgroup

Please use caution when comparing data between states there are many mitigating factors, including population, variance in Medicaid eligibility and enrollment, number of services allowed for reimbursement.

States are grouped in descending order NOTE: the y-axis changes with each slide grouping!

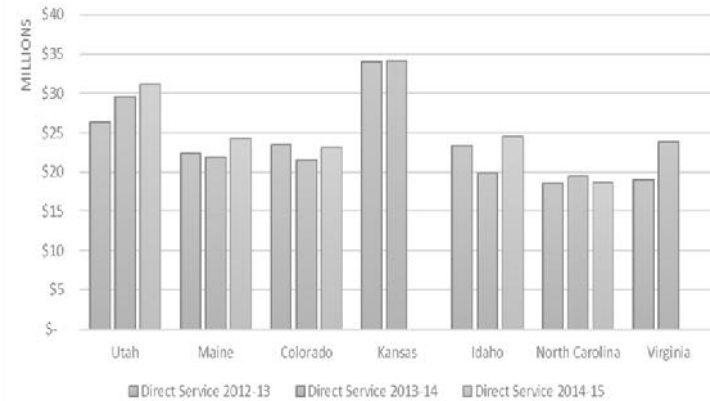
Sources

- 2016 Biennial Survey All responses were self-reported by officials at the state level
- Annual FMAP percentages obtained from The Henry J. Kaiser Family Foundation State Health Facts
- Student Enrollment and Free/Reduced Lunch data obtained from US Department of Education, National Center for Education

SELF-ASSESSMENT: 
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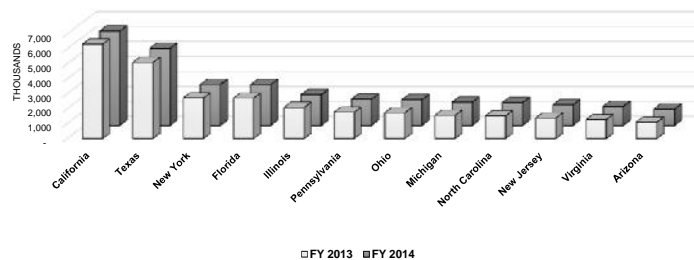
Direct Service Reimbursement by State of Survey Respondents



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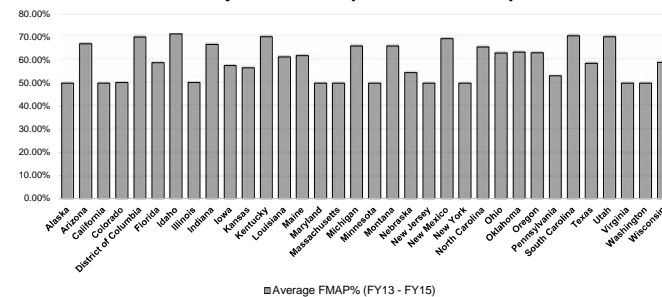
Student Enrollment by State of Survey Respondents
2012-13 and 2013-14



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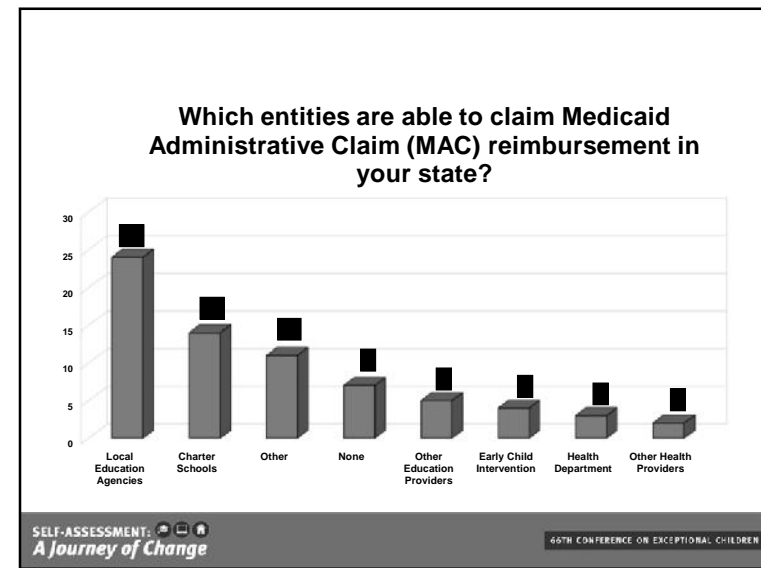
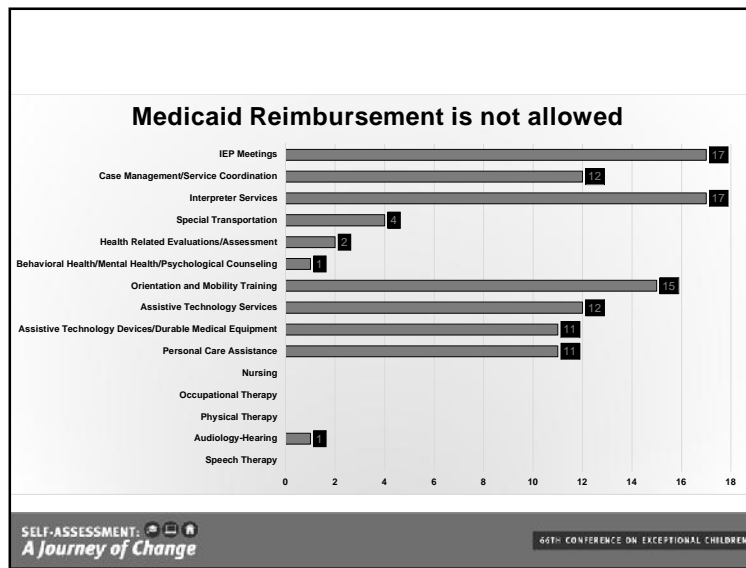
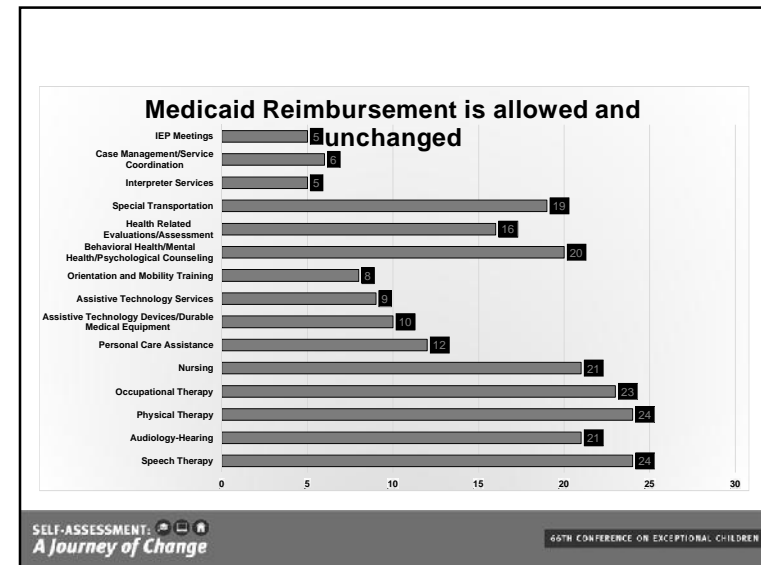
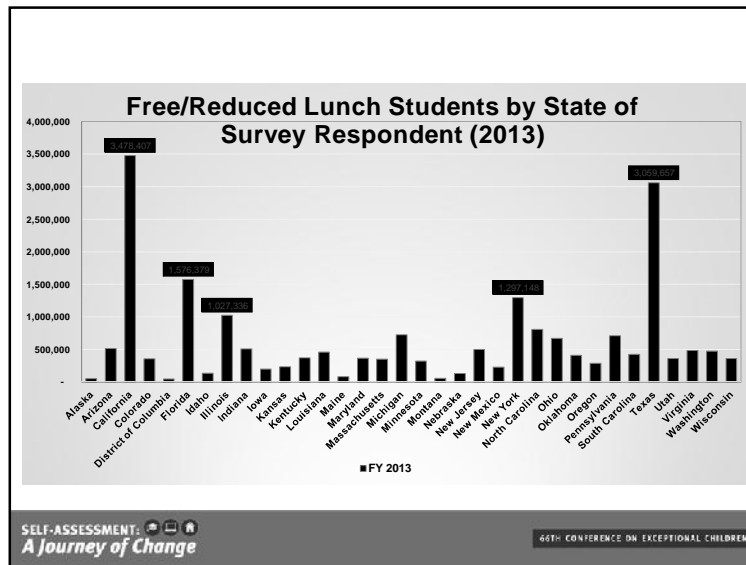
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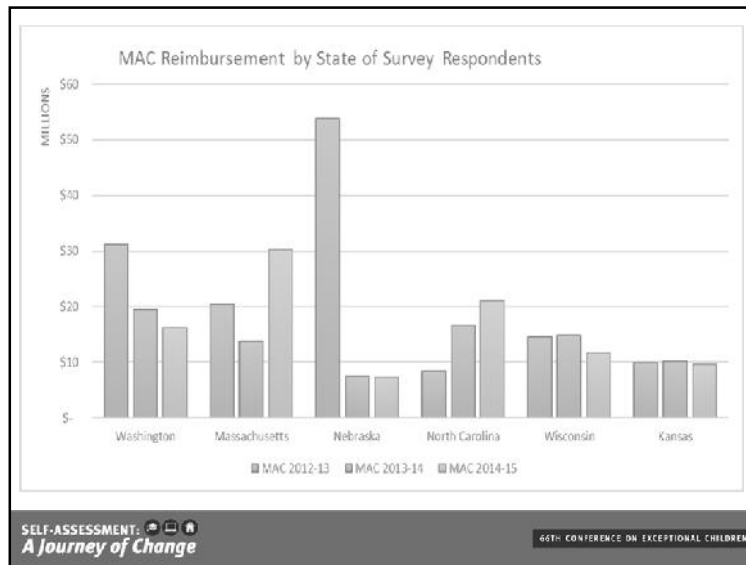
Average FMAP % by State of Survey Respondents (FY13 – FY15)



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School-Based Health Services Legislative Report

- Budget bill directs DMA to study all school-based health services that are eligible for a federal match
- DPI has requested the following additional IEP reimbursements:
 - Personal care
 - Evaluations, regardless of subsequent service on IEP
 - Transportation
 - Hearing and vision screenings
 - Additional qualified providers for counseling and substance use services

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Free Care Expansion

- CMS no longer disallows reimbursements for services provided for free to non-beneficiaries
- Policy and/or State Plan Amendment could result in reimbursement for non-IEP services
- DPI has requested the following additional non-IEP reimbursements:
 - Counseling/psychological services (504s, BIPs, MTSS)
 - Nursing (504s, BIPs, MTSS, IHP)
 - All related services (504s, BIPs, MTSS, IHP)
 - Hearing and vision screenings
 - Transportation

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ECATS Update

- Future EC data system
- Piloting system Spring 2017
- Will have basic Medicaid component
 - Basic package at reasonable cost to LEA
 - Additional features available for additional fee
 - LEA will remain the provider

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Medicaid Funds

- There are two Program Report Codes (PRC) for Medicaid funds
 - Medicaid Administrative Outreach Program
 - PRC 305
 - Medicaid Direct Services Reimbursement
 - PRC 306
 - OT, PT, SLP, Audiology, Nursing, School Psychology/Counseling

Medicaid Funds are Federal Funds

- Many LEAs place Medicaid FFS/Cost Recovery funds in Fund 8 or another local fund
- Medicaid reimbursements maintain their federal identity:
 - Cannot be used as local funding for Maintenance of Fiscal Effort (MOE)
 - Must be obligated and spent within 27 months
 - Must use last in first out (LIFO)
 - Must conduct physical inventory of equipment purchased with Medicaid reimbursements via Equipment Disposition form
- Refer to the codes in PRC 060 to ensure appropriate use of Medicaid funds for SWD

Questions/Comments?

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